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<b>DECLARATION FOR UTILITY OR DESIGN PATENT APPLICATION (37 CFR 1.63)</b>  <input checked="" type="checkbox"/> Declaration Submitted with Initial Filing      OR <input type="checkbox"/> Declaration Submitted after Initial Filing (surcharge (37 CFR 1.16 (e)) required)	<b>Attorney Docket Number</b>	10407/559
	<b>First Named Inventor</b>	Anthony L. Fontaine
	<b>COMPLETE IF KNOWN</b>	
	<b>Application Number</b>	10 / 033,716
	<b>Filing Date</b>	December 27, 2001
	<b>Group Art Unit</b>	Not Yet Known
	<b>Examiner Name</b>	Not Yet Known

**As a below named inventor, I hereby declare that:**

My residence, post office address, and citizenship are as stated below next to my name

I believe I am the original, first and sole inventor (if only one name is listed below) or an original, first and joint inventor (if plural names are listed below) of the subject matter which is claimed and for which a patent is sought on the invention entitled:

**REMOTE ACCESS VERIFICATION ENVIRONMENT SYSTEM AND METHOD**

the specification of which *(Title of the Invention)*

☐ is attached hereto  
OR  
☒ was filed on (MM/DD/YYYY) **12/27/2001** as United States Application Number or PCT International Application Number  and was amended on (MM/DD/YYYY)  (if applicable).

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment specifically referred to above.

I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56.

I hereby claim foreign priority benefits under 35 U.S.C. 119(a)-(d) or 365(b) of any foreign application(s) for patent or inventor's certificate, or 365(a) of any PCT international application which designated at least one country other than the United States of America, listed below and have also identified below, by checking the box, any foreign application for patent or inventor's certificate, or of any PCT international application having a filing date before that of the application on which priority is claimed.

Prior Foreign Application Number(s)	Country	Foreign Filing Date (MM/DD/YYYY)	Priority Not Claimed	Certified Copy Attached?	
				YES	NO
None			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>
			<input type="checkbox"/>	<input type="checkbox"/>	<input type="checkbox"/>

☐ Additional foreign application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

I hereby claim the benefit under 35 U.S.C. 119(e) of any United States provisional application(s) listed below.

Application Number(s)	Filing Date (MM/DD/YYYY)	<input type="checkbox"/> Additional provisional application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.
60/145,068	07/09/1999	

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## DECLARATION — Utility or Design Patent Application

I hereby claim the benefit under 35 U.S.C. 120 of any United States application(s), or 365(c) of any PCT international application designating the United States of America, listed below and, insofar as the subject matter of each of the claims of this application is not disclosed in the prior United States or PCT International application in the manner provided by the first paragraph of 35 U.S.C. 112, I acknowledge the duty to disclose information which is material to patentability as defined in 37 CFR 1.56 which became available between the filing date of the prior application and the national or PCT international filing date of this application.

U.S. Parent Application or PCT Parent Number	Parent Filing Date (MM/DD/YYYY)	Parent Patent Number (if applicable)
09/612,476 09/854,438	07/07/2000 05/11/2001	Abandoned Abandoned

☐ Additional U.S. or PCT international application numbers are listed on a supplemental priority data sheet PTO/SB/02B attached hereto.

As a named inventor, I hereby appoint the following registered practitioner(s) to prosecute this application and to transact all business in the Patent and Trademark Office connected therewith:

☐ Customer Number   
OR

☒ Registered practitioner(s) name/registration number listed below

Place Customer  
Number Bar Code  
Label here

Name	Registration Number	Name	Registration Number
Frank J. DeRosa	26,543	Seth H. Ostrow	37,410
Matthew J. Marquardt	40,997	James J. Woods	47,184
Frederick Yu	45,251	Pamela G. Maher	40,712
Ralph F. Hoppin	38,494	Leslie Restaino	38,893

☐ Additional registered practitioner(s) named on supplemental Registration Information sheet PTO/SB/02C attached hereto.

Direct all correspondence to: ☐ Customer Number **30076** OR ☒ Correspondence address below

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I hereby declare that all statements made herein of my own knowledge are true and that all statements made on information and belief are believed to be true; and further that these statements were made with the knowledge that willful false statements and the like so made are punishable by fine or imprisonment, or both, under 18 U.S.C. 1001 and that such willful false statements may jeopardize the validity of the application or any patent issued thereon.

Name of Sole or First Inventor:		<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])		Family Name or Surname			
Anthony L.		Fontaine			
Inventor's Signature				Date	5/30/02
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				Country	USA

☐ Additional inventors are being named on the \_\_\_\_\_ supplemental Additional Inventor(s) sheet(s) PTO/SB/02A attached hereto



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## DECLARATION

### ADDITIONAL INVENTOR(S) Supplemental Sheet

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<b>Name of Additional Joint Inventor, if any:</b>				<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor			
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Inventor's Signature				Date			
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City		Addison	State	IL	ZIP	60101	Country
							USA
<b>Name of Additional Joint Inventor, if any:</b>				<input checked="" type="checkbox"/> A petition has been filed for this unsigned inventor			
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Wesley				Park			
Inventor's Signature				Date			
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Post Office Address							
City		Aurora	State	IL	ZIP	60506	Country
							USA
<b>Name of Additional Joint Inventor, if any:</b>				<input type="checkbox"/> A petition has been filed for this unsigned inventor			
Given Name (first and middle [if any])				Family Name or Surname			
Inventor's Signature				Date			
Residence: City			State		Country		Citizenship
Post Office Address							
Post Office Address							
City			State		ZIP		Country

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